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	DAVID W. WON			Ce	rtificate of Mailing or Tran	smission	
	46 WILLOWBROOTHORNHILL, ON			I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.			
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FC:	2501	700.00 OP 300.00 OP					(Signature)
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L	APPLICATION NO.	FILING DATE	FIRST NAMED IN		D INVENTOR .	ATTORNEY DOCKET NO.	CONFIRMATION NO.
	10/616,213	07/10/2003	Geoffrey Al		Alan Moss	GDSDTRAY/03	1730
٦	TITLE OF INVENTION: DI			PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
L		SMALL ENTITY					
۲	nonprovisional YES		\$700		\$300	\$1000 ¬	05/10/2005
L	EXAMINER GEHMAN, BRYON P		ART UNIT 3728		CLASS-SUBCLASS	J	
-	. Change of correspondence			206-764000 nting on the patent front page, I			
	Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3	3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
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Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):							oup entity Government
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Publication Fee (No small entity discount permitted)				Payment by credit card. Form PTO-2038 is attached.			
_	Deposit Account Number				ector is hereby authorized by count Number	charge the required fee(s), or enclose an extra c	credit any overpayment, to copy of this form).
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-		a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.					
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	Authorized Signature	Digw.	Mar	☆		5 March	2005
	Typed or printed name	DAVID W	. WON	6	_ Registration	1 No. 26, 408	
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